

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to: *1:01cv688 #18,21,22*

*JERBAIN MEJIA*

*391-808*

*ROSS CORRECTIONAL INST  
16149 STATE ROUTE 104  
CHILLICOTHE, OH 45601*

## COMPLETE THIS SECTION ON DELIVERY

Filed 08/10/2004

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## A. Signature

*X W Durh*

Agent  
 Addressee

## B. Received by (Printed Name)

*W DURHA*

## C. Date of Delivery

*8-12-04*D. Is delivery address different from item 1?  YesIf YES, enter delivery address below:  No

## 3. Service Type

Certified Mail  Express Mail  
 Registered  Return Receipt for Merchandise  
 Insured Mail  C.O.D.

## 4. Restricted Delivery? (Extra Fee)

 Yes

2. Article Number

*7002 0860 0006 5229 8528*

(Transfer from service label)

Domestic Return Receipt

102595-02-M-0835

PS Form 3811, August 2001